REMARKS/ARGUMENTS

Claims 1-17 are pending in the application. Claims 2 and 3 have been canceled without prejudice or disclaimer, claims 1, 6, 16-17 have been amended, new claims 18-20 have been added. No new matter has been added. Reconsideration of the claims is respectfully requested.

This is in response to the office action dated 30 November 2004. Reconsideration of the outstanding rejections is respectfully requested.

In the action, claim 2 was considered allowable and has been re-written in independent form as claim 1. The reasons stated for allowed, however, do recognize that the advantages of this cannula and needle not being on identical axes but do not require that be precisely parallel to be distinguishable from the prior art.

The cited art shows orthogonal devices, but such devices do not provide the *potential* for rotation on the needle axes.

New claim 18 is similar to claim 2, but recognize that the axes may be generally parallel vs. exactly parallel.

New claim 19 is also similar to claim 2 but recognizes that the invention can be achieved with the cannula and needed in separate generally parallel planes, but not on identical axes. (This allows for the parallel planes to be identical, so long as the axes are not.) The prior art does not meet this requirement, because in all cases, it teaches non parallel (mostly orthogonal) planes which cannot achieve the present invention.

Claim 6 has been made independent and should also be allowable. The concept of having the needle as an axis of rotation with the cannula being off center thereof, is no where shown in the prior art and provides a definite advantage. First, the needle and

Page 7

associated structures are capable rotation, but, the product as a whole can be made more compact because the needle and cannula axes are not co-extensive. Thus there can be a degree of overlap where the two are in a side by side relationship. This cannot be accomplished with either orthogonal needle /cannula combinations (no rotation on the needle axis) or collinear designs (the stacking effect makes the product taller/thicker, which is undesirable to the patient).

Claim 20 is similar to original claim 1 but includes additional features relating to a rotatable hub with stops. The rotation allow the user to more easily position external supply tubing without risk of pinching the tubing and the stop prevent multiple rotations of the hub which could likewise twist and block the tubing. The prior art references are silent on this feature and the Konopka reference, the hub is welded in place (col. 13, lines 52-53).

Method claim 16 has been modified to carry the concept of claim into a method and should therefore be likewise considered allowable.

The remaining claims add features not found in the prior art.

The claim objections and sec 112/2 non substantive rejections have been attended to and those claims should also be allowable.

In view of the forgoing it is respectfully submitted that the case is in condition for allowance.

Page 8

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If a telephone conference would be helpful in resolving any issues concerning this communication, please contact the attorney listed below, Michael B. Lasky at (952) 253-4106.

Respectfully submitted,

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